

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Jh		10/22/02
O.I.P.E. CLASSIFIER	W	45	10/31
FORMALITY REVIEW	MPB	90	11/17/02
RESPONSE FORMALITY REVIEW	AC	82	12/16/02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted 0 ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/22/02
2	✓	✓	10/22/02
3	✓	✓	10/22/02
4	✓	✓	10/22/02
5	✓	✓	10/22/02
6	✓	✓	10/22/02
7	✓	✓	10/22/02
8	✓	✓	10/22/02
9	✓	✓	10/22/02
10	✓	✓	10/22/02
11	✓	✓	10/22/02
12	✓	✓	10/22/02
13	✓	✓	10/22/02
14	✓	✓	10/22/02
15	✓	✓	10/22/02
16	✓	✓	10/22/02
17	✓	✓	10/22/02
18	✓	✓	10/22/02
19	✓	✓	10/22/02
20	✓	✓	10/22/02
21	✓	✓	10/22/02
22	✓	✓	10/22/02
23	✓	✓	10/22/02
24	✓	✓	10/22/02
25	✓	✓	10/22/02
26	✓	✓	10/22/02
27	✓	✓	10/22/02
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If more than 150 claims or 10 actions  
staple additional sheet here

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